

# **TRURO TAXATION AID COMMITTEE ELDERLY AND DISABLED TAX AID FUND**

**--FISCAL YEAR 2010--**

**GUIDELINES  
AND  
APPLICATION\***

*\*Must be submitted by February 1, 2010*

(12/1/2009)

## **TRURO ELDERLY AND DISABLED TAX AID FUND FISCAL YEAR 2010**

### **APPLICATION GUIDELINES**

This fund was established to provide taxation assistance for the elderly and disabled residents of Truro from volunteer contribution of its citizens on their real estate tax forms. The fund was authorized by vote of Annual Town Meeting, April 13, 1999, Article 13 (acceptance of Massachusetts General Law Chapter 60, Section 3D). The eligibility criteria for assistance from this fund, is as follows:

- **Applicant must own and occupy the real estate in Truro as his or her primary domicile.**  
An applicant must be the titled owner of the property or hold a life estate in the property. If title is held by a trust, the applicant must be both a trustee and at least a 50% beneficiary of the trust in order to qualify. Applicant must also have resided in the Town and held title to the taxed property a full calendar year prior to submission deadline.
- **Applicant must be elderly or disabled.**
  - **“Elderly”** is defined as a person who is at least 65 years of age on or before July 1<sup>st</sup> of 2009 for which aid is being requested.
  - **“Disabled”** is defined as a person who is not able to work due to illness or accident and is currently receiving benefits from one or more of the following programs based on a determination of disability: Social Security Administration, SSI or Medicaid, Veterans Administration, Workers Compensation, or any other such program or agency providing public/financial assistance due to the disability.
- **Total yearly household income, *including Social Security*, must be less than \$28,000 if single, or less than \$40,000 if married.**

## **TRURO ELDERLY AND DISABLED TAX AID FUND FISCAL YEAR 2010**

### **APPLICATION PROCESS**

- Taxation aid assistance will be awarded on an annual basis.
- Application forms will be available at Town Hall, Public Library and the Council on Aging.
- Applications for Fiscal Year 2010 will be due no later than February 1<sup>st</sup>, 2010 and must be accompanied, if filed, by a copy of your entire 2008 Federal Income Tax return and any supporting documents indicating disability benefit receipts.
- Return completed Application to: Town Treasurer, c/o Truro Town Hall, PO Box 2012, 24 Town Hall Rd., Truro, MA 02666-2012
- You must first avail yourself of the exemptions offered by the Board of Assessors. A home owner is NOT eligible for the Truro Elderly and Disabled Tax fund if they are eligible for a Clause 41A Property Tax Deferral.
- All information supplied to the Committee will be held in the strictest of confidence and not be open for public inspection.
- In reviewing eligible applications, consideration will also be given to an applicant's overall financial situation as determined by value of other assets, personal property owned, living expenses and unusual financial hardship.

### **DISTRIBUTION OF FUNDS**

- The funds will be disbursed on a needs basis, as determined by the Committee's application of the eligibility guidelines. Since the fund is replenished annually through voluntary contributions, no set dollar amount can be established for any particular year. If a Taxation Aid grant is awarded, it will be applied to the Fiscal Year 2010 tax bill and the applicant will be notified by mail prior to April 1, 2010.

**TRURO ELDERLY AND DISABLED TAX AID FUND**  
**FISCAL YEAR 2010**  
**APPLICATION**

NAME \_\_\_\_\_ AGE \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_  
 NATURE OF DISABILITY, IF ANY \_\_\_\_\_  
 PROPERTY LOCATION \_\_\_\_\_ YRS. OWNED \_\_\_\_\_  
 IF IN TRUST, LIST TRUSTEE(S): \_\_\_\_\_  
 ASSESSED VALUE OF RESIDENCE \_\_\_\_\_  
 ANNUAL GROSS HOUSEHOLD INCOME, INCLUDING SOCIAL SECURITY \_\_\_\_\_

- A. WHAT IS THE TOTAL VALUE OF YOUR NON-TAXABLE MONETARY ASSETS, WHICH WOULD INCLUDE: SAVINGS AND CHECKING ACCOUNTS, MONEY MARKET ACCOUNTS, STOCKS, BONDS, IRA'S, 401K'S, CD'S, ANNUITIES AND OTHER SUCH MONIES OR INVESTMENTS? \_\_\_\_\_

*(Use and submit attached worksheet)*

- B. WHAT IS THE ESTIMATED TOTAL VALUE OF PERSONAL PROPERTY OWNED, WHICH WOULD INCLUDE: VEHICLES, BOATS, JEWELRY, ART, ANTIQUES, COLLECTIONS, AND OTHER SUCH POSSESSIONS? \_\_\_\_\_

*(Use and submit attached worksheet)*

- C. WHAT ARE YOUR CURRENT MONTHLY EXPENSES, WHICH WOULD INCLUDE: MORTGAGE, UTILITIES, HEALTH CARE, INSURANCE, LOANS, CREDIT CARD PAYMENTS, AND OTHER SUCH EXPENDITURES? \_\_\_\_\_

*(Use and submit attached worksheet)*

DO YOU OWN ANY OTHER REAL ESTATE? \_\_\_\_\_ IF SO WHERE, AND WHAT IS ITS ASSESSED VALUE? \_\_\_\_\_

HAVE YOU APPLIED FOR, OR ARE YOU RECEIVING, ANY OTHER EXEMPTIONS OR FINANCIAL ASSISTANCE? \_\_\_\_\_ IF SO, PLEASE EXPLAIN \_\_\_\_\_

ARE THERE ANY UNUSUAL OR EXTRAORDINARY CIRCUMSTANCES AFFECTING YOUR FINANCIAL SITUATION THAT YOU WISH TO HAVE CONSIDERED WITH THIS APPLICATION? \_\_\_\_\_ IF SO, PLEASE EXPLAIN: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
*(Signed and submitted under the pains and penalties of perjury)*

## TAX ASSISTANCE APPLICATION WORKSHEET-2010

(attach additional sheets if needed)

- A.** LIST ALL OF YOUR **NON-TAXABLE MONETARY ASSETS** AND THE ESTIMATED VALUE OF EACH, BELOW. CALCULATE THEIR TOTAL WORTH AND ENTER IT ON PAGE 3 OF THIS APPLICATION. **CONSIDER: SAVINGS AND CHECKING ACCOUNTS, MONEY MARKET ACCOUNTS, STOCKS, BONDS, IRA'S, 401K'S, CD'S, ANNUITIES, AND OTHER SUCH MONIES OR INVESTMENTS.**

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- B.** LIST ALL **PERSONAL PROPERTY** OWNED AND ITS ESTIMATED VALUE BELOW. CALCULATE ITS TOTAL WORTH AND ENTER IT ON PAGE 3 OF THIS APPLICATION. **CONSIDER: VEHICLES, BOATS, JEWELRY, ART, ANTIQUES, COLLECTIONS, AND OTHER SUCH PERSONAL POSSESSIONS OF VALUE)**

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- C.** ESTIMATE AND LIST ALL OF YOUR **MONTHLY EXPENSES** BELOW. CALCULATE THE TOTAL AND ENTER IT ON PAGE 3 OF THIS APPLICATION. **CONSIDER: MORTGAGE, UTILITIES, HEALTH CARE, INSURANCE, LOANS, CREDIT CARD PAYMENTS, AND OTHER SUCH LIABILITIES OR EXPENDITURES.**

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**NOTE: IF FILED, A COPY OF YOUR 2008 FEDERAL TAX RETURN MUST BE SUBMITTED WITH THIS APPLICATION.**

**FOR TAX AID COMMITTEE USE ONLY**

**TAX AID COMMITTEE FINAL ACTION:**

Date Granted \_\_\_\_\_ Date denied \_\_\_\_\_ Amount \_\_\_\_\_